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ABSTRACT

Described is an integrated psycho-educational program center (IPEC) designed to develop an administrative construct for an integrated educational program to provide maximum possible neuropsychoeducational services in the regular classroom for all children identified as exceptional and to provide strategies for developing skills among regular class teachers and special educators within the mainstream of school life. Sections address the following IPEC components: philosophical assumptions; conceptual statement of program objectives; general program description; elements of IPEC; general administrative construct; IPEC activities; general curriculum emphasis areas and procedures; center staff; description of procedures for implementation activities; personnel responsibilities; example of daily schedule; parent-family participation; evaluation; demonstration; advisory council; staff and job description; time-table; and references. Appended are evaluation scales, staff development material used during the 1975-76 year, a staff development identification questionnaire, needs assessment data, an intake form, and a general diagnostic battery. (SEH)

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TECHNICAL REPORT

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AN INTEGRATED PSYCHO-EDUCATIONAL PROGRAM

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TECHNICAL REPORT

AN INTEGRATED PSYCHO-EDUCATIONAL PROGRAM CENTER (IPEC)

THEME

Reformulation of Roles
Reformulation of Educational Content
Reformulation of Approach

De-emphasis on Etiological Categories
Emphasis on Educational Categories

De-emphasis on Polarization
Emphasis on Integration

De-emphasis on Standardized Evaluation
Emphasis on Criteria Reference Evaluation

Utilization of Creative Problem Solving Approach for Factual Learning

Formulator
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PHILOSOPHICAL ASSUMPTIONS:

Institutional

1. Institutional philosophical orientation effects educational programs in proportion to its directional orientation.

2. An educational program can be meaningfully interpreted only in terms of its organization as a total system.

Process

3. It is the understanding of process, rather than closure, which leads towards the specific awareness at the cognitive and affective level regarding the elements, interaction and overall dynamics of the program.

4. It is the organism-environment interchange which leads and effects the formulation and development of cognition, sensory reception, body & self concept and therapeutic communication.

5. Cognitive structures evolve as our inherited disposition interacts with environmental (exogenous) stimulus.

Diagnosis

6. Initial screening and psycho-educational appraisal tools are more effective and reveal educationally more relevant information if the tools incorporate educational content as well as neuropsychological conceptual elements.

Implementation

7. Differential programs can be incorporated into the regular school by delineating three specific activities, i.e., referral, diagnosis and cooperative implementation of the program within the school with regular classroom teachers and at home with parents.

8. Development of three major skills - digital (quantitative), language and movegenic - in a holistic fashion as an educationally therapeutic tool fosters cognition, sensory reception, body & self concepts and therapeutic communication.

Based upon the above assumptions, the following pages include the conceptual outline and some specific procedures implemented during the first year of the project. Readers are advised to keep in mind the general philosophical assumptions of the project as they read. The overall project will reflect an integrated holistic approach.

CONCEPTUAL STATEMENT OF PROGRAM OBJECTIVES

Ironically in the past it seems the delivery of neuropsychological and educational services to exceptional children and the training of educational personnel, both intending to reduce the psycho-social and educational isolation that so often characterizes the lives of exceptional individuals, under the existing conditions, have been unable to achieve the intended goal. In the view of the writer of this program, the conditions causing such an inability to achieve the intended goal may be or is fostered by (1) a lack of an acceptable mode of operation for the field of neuropsychology and education, and (2) existing dichotomy, polarity and lack of an integrated effort by these institutions directly responsible for delivery of such services and the training of such personnel. Therefore, an attempt was made to implement an integrated and relatively de-dichotomized and de-polarized program to assess the effectiveness of such a program in the resolution of the following questions:

1. Will the new services available to exceptional children through an aroused current concern for the mainstreaming increase the isolation of exceptional children, or will these new services be extended in such a way as to permit them to interact to their fullest ability within the mainstream of life in the school?

2. Will the training program, if provided in such a way as to permit the special educator to interact with the mainstream of life in the school including exceptional children and in such a way as to permit the regular classroom teacher to interact with special educators in the same setting, reduce isolation?

GENERAL PROGRAM DESCRIPTION

An integrated psycho-educational program center (IPEC) was initiated with two major goals: (1) to develop an administrative construct for an integrated educational program to provide maximum possible neuropsycho-

educational services in the regular classroom for all children currently identified as exceptional**, (2) to provide strategies for developing skills among regular classroom educational practitioners and special educators within the mainstream of school life.*

The concept of IPEC was established at James S. Elementary School in Bartow, Florida. Exceptional children between ages K-5 began to spend a relatively brief period of time in developing digital (quantitative), language, perceptual motor, body & self concept and interpersonal therapeutic communication skills that would facilitate their functioning in mainstream settings that might be available to them. During the period of time these children spent in the center, a comprehensive educational program was designed based upon psycho-educational assessment. This comprehensive program contained both the curriculum and the procedures to carry out the curriculum to provide the child with the best possible opportunity to benefit from the placement within the educational setting.

It was also one of the contentions of the program that in order to produce the best possible match between the exceptional child's behavior repertoire and the environmental setting in which he must perform, a program must effect directional changes in both components in contributing to the match. Thus, in addition to the designing of a comprehensive program in the center, to enhance the child's functioning, a major continuous effort was made to prepare the various relevant educational settings (regular classroom and home) to be maximally receptive to the needs of exceptional children.

The plan of this program was in no way designed to do away with some existing services for exceptional children. On the contrary, this program was designed to coordinate with existing services to provide alternative settings within which exceptional children may function.

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* *The term neuropsycho-educational is conceived here, by the author, to designate brain behavior relationship as it interrelates to pedogogical process.*

** *The word exceptional is used here as an inclusive term and includes children displaying learning and behavior aberation. Also, it is perceived by the author to be a word which represents the clustering of rules and logic for the exceptions to any existing rules and logic in use for describing a phenomenon or set of phenomena.*

ELEMENTS OF IPEC

Major elements of IPEC program were to:

1. Develop an overall administrative construct for neuropsychological and educational services within the school system and educational personnel training institutions.

2. Initiate three specific activities - referral, diagnosis and co-operative implementation through integrated psycho-educational demonstration learning center.

3. Develop three major skills - digital (quantitative), language and movegenic - through general curriculum coordination.

4. Utilize holistic and interactional approach.

5. Reformulate the roles for staff involved in program and general implementation procedures.

6. Involve parents and community.

7. Implement an integrated evaluation system based on Singh's Conceptual Model*.

8. Foster growth in cognition, sensory reception, body & self concept and therapeutic communication within a total system (school system and training institution).

9. Utilize IPEC's overall activities for in-service training.

10. Obtain waivers from existing guidelines of procedures from the school system, training institution, state and federal organizations and to implement alternate program.

The following report is intended to demonstrate the main elements in action:

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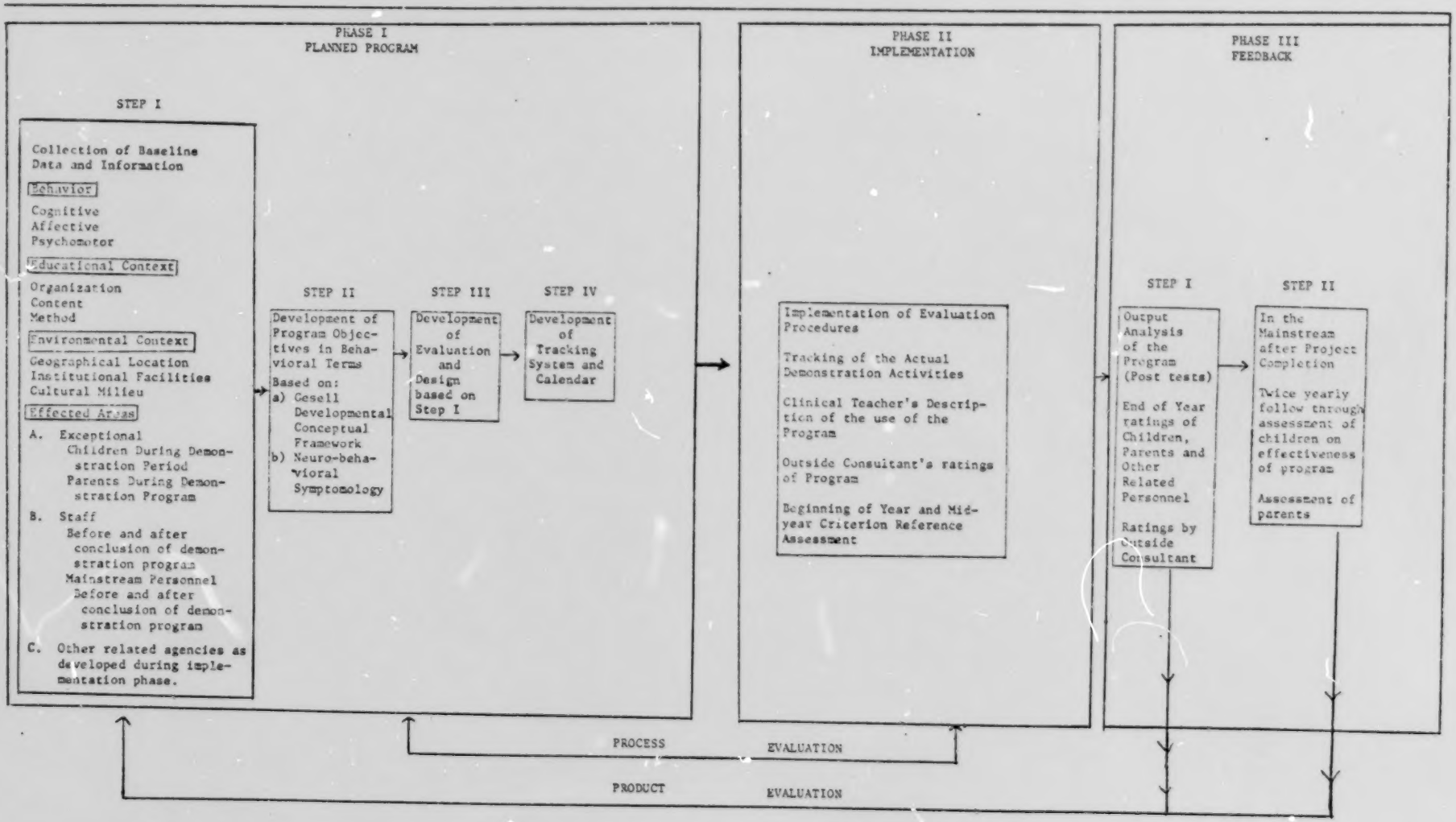
*SINGH, S.P., A Strategy to Evaluate T.T. Program, Educational Technology, Vol. 19, 1971. (See Conceptual Model, Figure A)

FIGURE A

OPERATIONAL SYSTEM FOR EVALUATION

S.P. Singh

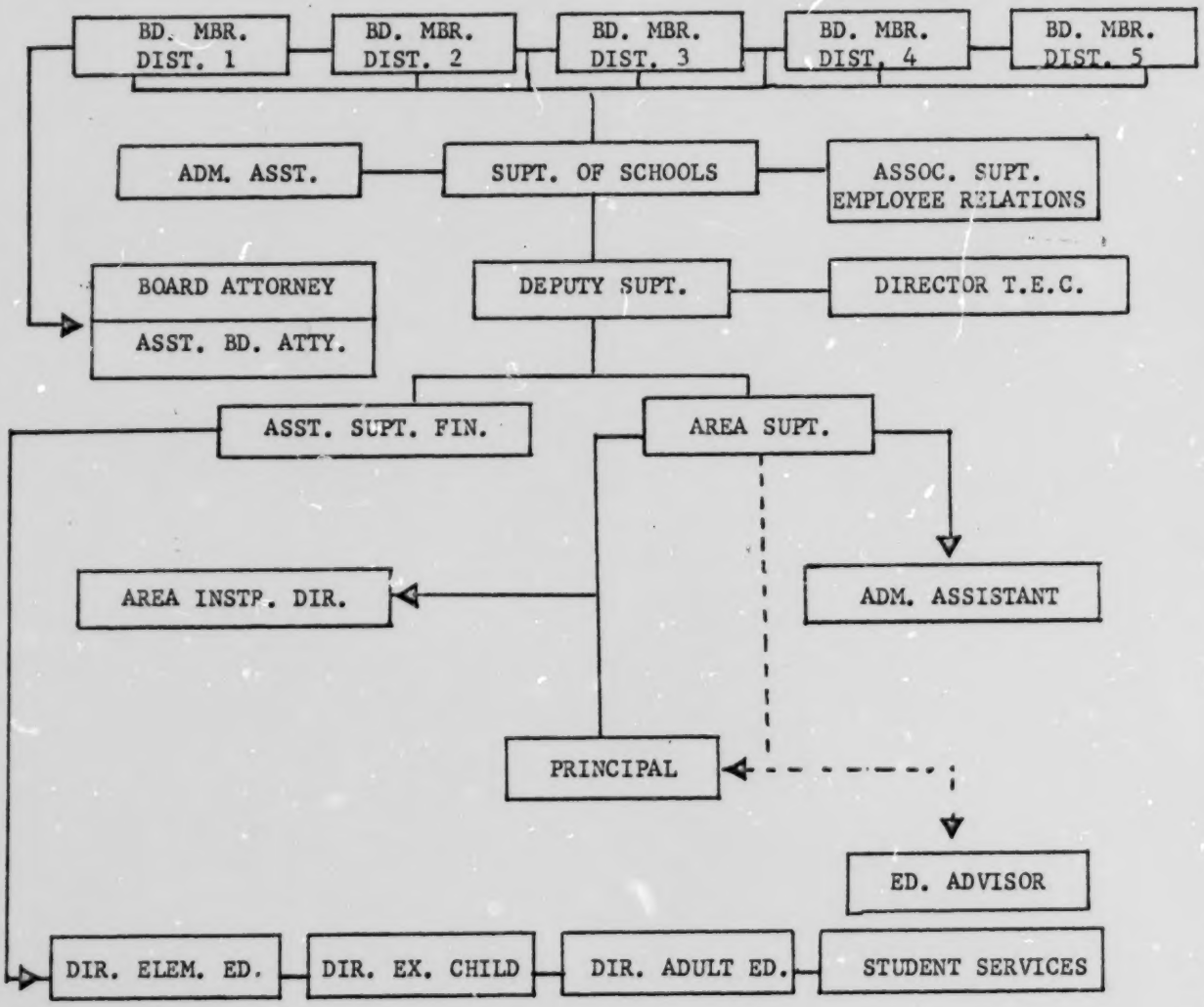


GENERAL ADMINISTRATIVE CONSTRUCT

The following administrative organizational charts are to delineate line units and staff units (Educational Advisor) and to represent the units directly involved with the program; such as Exceptional Child Educational Program, Teacher Educational Center (marked) and other administrative units involved in making overall decisions, but not in day to day operation.

Figure 1

ADMINISTRATION ORGANIZATIONAL CHART

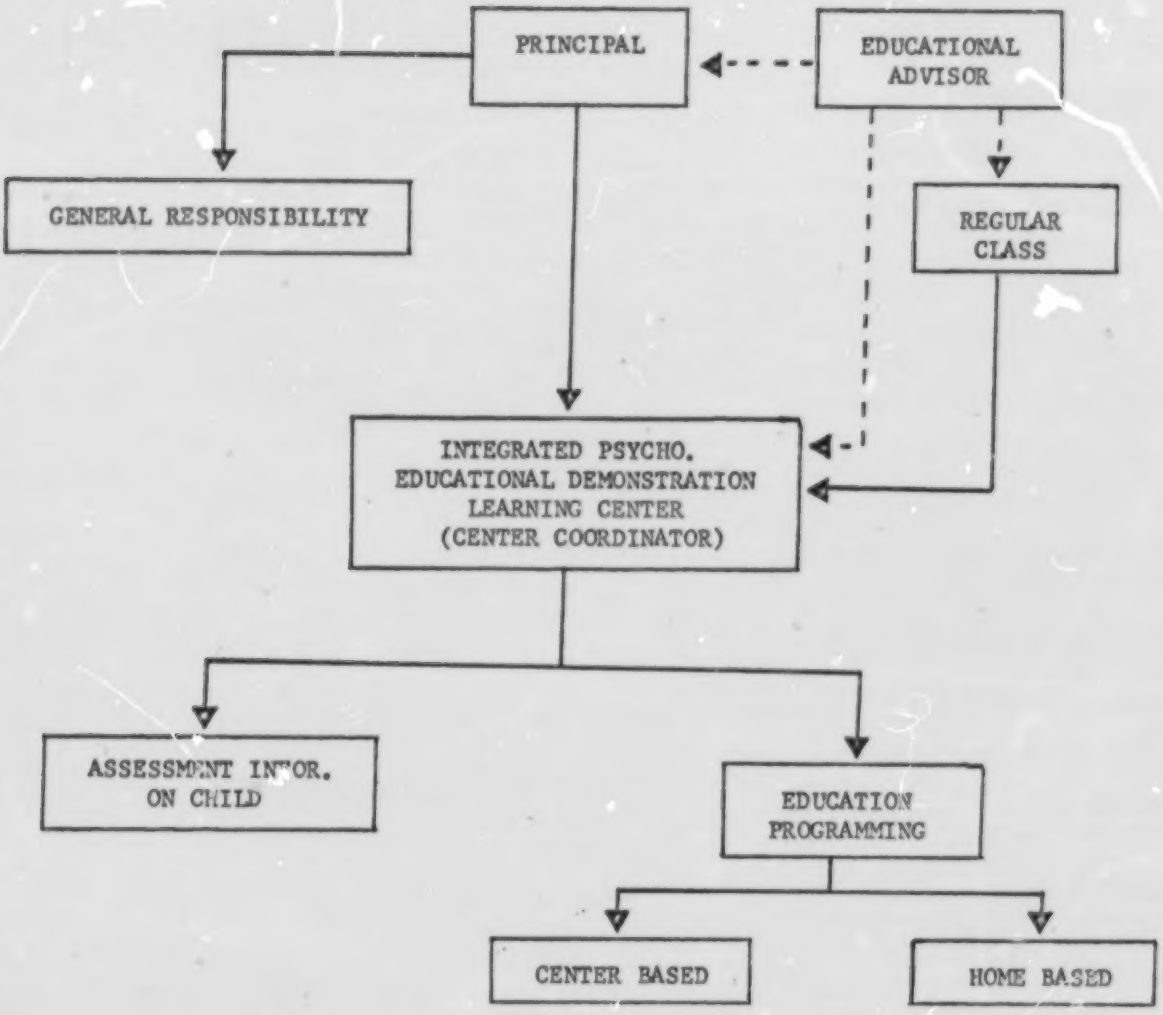


LEGEND

Line _____ Direct Administration; Staff ---------- Staff

Figure #2

SCHOOL BASED CHART



LEGEND

Line _____ Direct Administration Staff----------Staff

INTEGRATED PSYCHO-EDUCATIONAL DEMONSTRATION
LEARNING CENTER

The proposed center had developed three major activities as follows: (See Figure #3)

1. Referral.
2. Diagnostic and Curriculum Design.
3. Cooperative Implementation.

These three activities were also utilized for staff development to enhance skills necessary for referral, diagnosis, curriculum design and overall implementation procedures.

Target Population Served

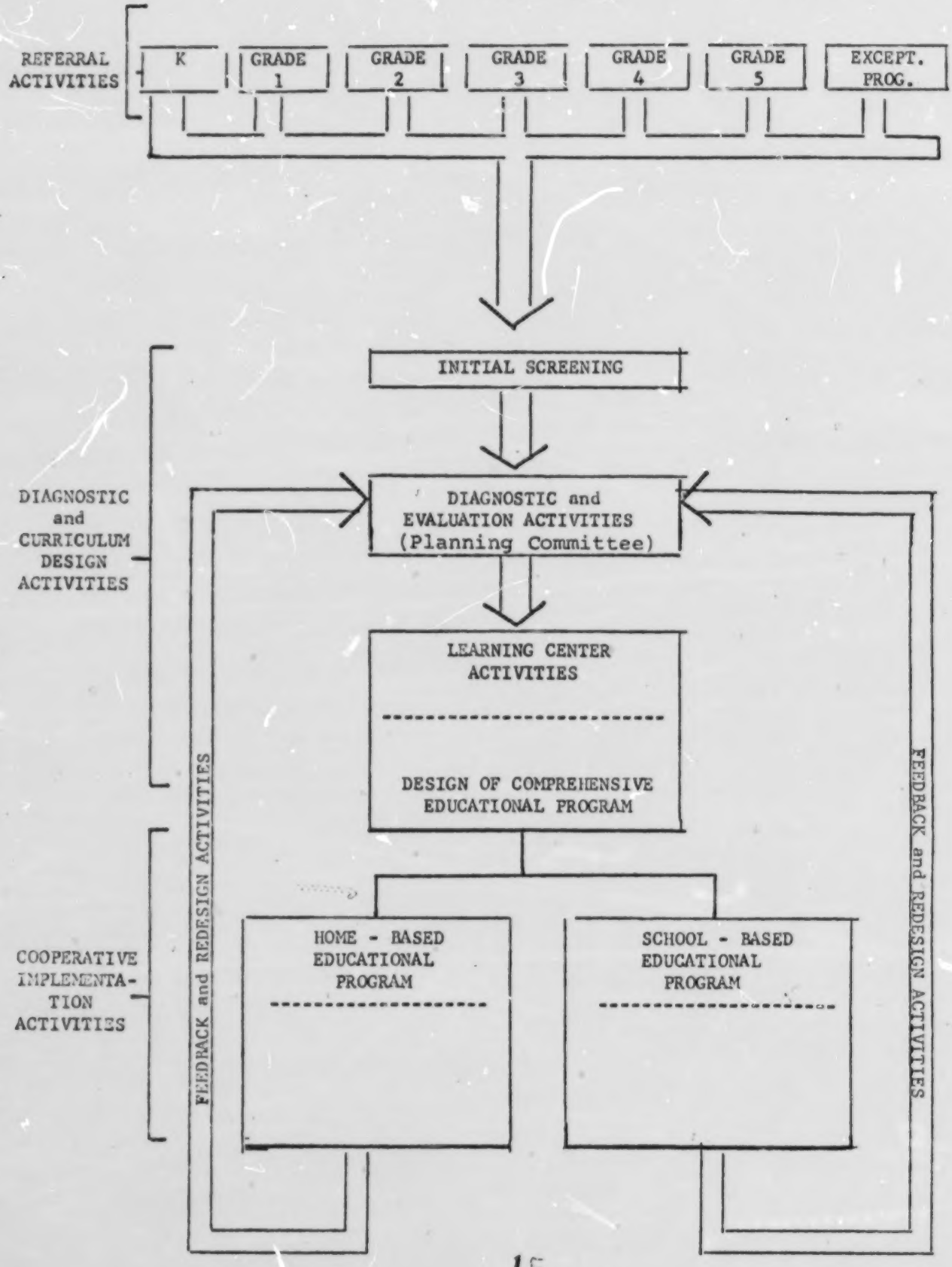
The center served children between ages 5-10 years displaying lack of learning and behavior adaption skills. During its initial years, the center did not provide activities for mobility training and training for sign language. However, suggestions were made to include activities with the staff development in the near future.

Selection Criteria for Initial Screening

In general, multiple criteria systems were used rather than single criterion. The following criteria were utilized as a guideline for acceptance into the program:

1. Youngsters in regular classrooms who are exhibiting lack of learning skills identified by checklist.
2. Youngsters not being served adequately in regular classroom due to lack of adaptive behavioral skills as identified by behavior checklist.
3. Sensory dysfunctioning as determined by scales such as Frostig, Purdue, Bowers, TPT, Dynamometric & Agnosia tests.
4. Indication of average I.Q. on any standardized IQ tests such as on Draw a Man test, Slosson test, Wise, Binet.
5. Parents must indicate willingness to become involved in their child's program.
6. Regular classroom teacher must be involved in the implementation of educational program, providing continuous feedback and staff development activities.

FIGURE #3


REFERRAL ACTIVITIES
K
GRADE 1
GRADE 2
GRADE 3
GRADE 4
GRADE 5
EXCEPT. PROG.
INITIAL SCREENING
DIAGNOSTIC and CURRICULUM DESIGN ACTIVITIES
DIAGNOSTIC and EVALUATION ACTIVITIES (Planning Committee)
LEARNING CENTER ACTIVITIES
DESIGN OF COMPREHENSIVE EDUCATIONAL PROGRAM
COOPERATIVE IMPLEMENTATION ACTIVITIES
HOME - BASED EDUCATIONAL PROGRAM
SCHOOL - BASED EDUCATIONAL PROGRAM
FEEDBACK and REDESIGN ACTIVITIES
FEEDBACK and REDESIGN ACTIVITIES

General Curriculum Emphasis Areas and Procedure

Center activities in general will de-emphasize the etiological categories such as EMH, SLD, etc. for its clientele and emphasize the assessment and development of skills in the following areas:

1. Digital (Quantitative) Skills.
2. Language Skills (Syntax, Phonology, and Semantic).
3. Novegenic (Perceptual Motor) Skills.

All above activities will have the following generic goals to achieve:

1. Growth in Cognition.
2. Development of Body Concept.
3. Development of Self-Concept.
4. Development of Sensory Receptivity.
5. Development of Therapeutic (Interpersonal) Communication.

Examples

Emphasis Activity Area: Digital (Quantitative) Skill

Goals: Digital Skills
Growth in Cognition
Growth in Body Concept
Growth in Self-Concept
Growth in Sensory Receptivity
Growth in Therapeutic Communication

Emphasis Activity Area: Language Skills (Syntax, Phonology, and Semantic)

Goals: Language Skills
Growth in Cognition
Growth in Body Concept
Growth in Self-Concept
Growth in Sensory Receptivity
Growth in Therapeutic Communication

Emphasis Activity Area: Novegenic (Perceptual Motor Skills)

Goals: Novegenic Skills
Growth in Cognition
Growth in Body Concept
Growth in Self-Concept
Growth in Sensory Receptivity
Growth in Therapeutic Communication

Specific Content Areas for Skills and Suggested Materials

A. Digital (Quantitative) Skills

1. Areas	Status
a. Counting from 1-10	Not Needed - Working - Prescribe
b. Counting from 10-20	Not Needed - Working - Prescribe
c. Counting from 20-30	Not Needed - Working - Prescribe
d. Recognizing numerals 1-10	Not Needed - Working - Prescribe
e. Recognizing numerals 10-20	Not Needed - Working - Prescribe
f. Recognizing numerals 20-30	Not Needed - Working - Prescribe
g. Writing numerals 1-10	Not Needed - Working - Prescribe
h. Writing numerals 10-20	Not Needed - Working - Prescribe
i. Writing numerals 20-30	Not Needed - Working - Prescribe
j. Knowing addition facts 1-10	Not Needed - Working - Prescribe
k. Knowing addition facts 10-20	Not Needed - Working - Prescribe
l. Carrying over to the 10's place	Not Needed - Working - Prescribe
m. Carrying over to the 100's place	Not Needed - Working - Prescribe
n. Knowing subtraction facts 1-10	Not Needed - Working - Prescribe
o. Knowing subtraction facts 10-20	Not Needed - Working - Prescribe
p. Borrowing from 10's place	Not Needed - Working - Prescribe
q. Borrowing from 100's place	Not Needed - Working - Prescribe
r. Understanding concept of multiplication	Not Needed - Working - Prescribe
s. Multiplying two-place numbers	Not Needed - Working - Prescribe
t. Multiplying three place numbers	Not Needed - Working - Prescribe
u. Understanding concept of division	Not Needed - Working - Prescribe
v. Dividing with remainder	Not Needed - Working - Prescribe
w. Dividing with two-place numbers	Not Needed - Working - Prescribe
x. Understanding concept of fractions	Not Needed - Working - Prescribe
y. Comprehending and solving word problems	Not Needed - Working - Prescribe

2. Materials — Status

a. G.C.M.P.	Not Needed - Working - Prescribe
b. Scott Foresman	Not Needed - Working - Prescribe
c. Houghton-Mifflin	Not Needed - Working - Prescribe
d. A.B.C.	Not Needed - Working - Prescribe
e. Fitzhugh	Not Needed - Working - Prescribe
f. Mafax	Not Needed - Working - Prescribe
g. Cuisenaire	Not Needed - Working - Prescribe
h. Stearns	Not Needed - Working - Prescribe
i. T.R.M. Math Materials	Not Needed - Working - Prescribe
j. Number Lines	Not Needed - Working - Prescribe
k. Flash Cards	Not Needed - Working - Prescribe
l. Mimeo Sheets	Not Needed - Working - Prescribe
m. Teacher-made Materials	Not Needed - Working - Prescribe
n. Popsicle Sticks	Not Needed - Working - Prescribe
o. Counters	Not Needed - Working - Prescribe
p. Others	Not Needed - Working - Prescribe

B. Language Skills

1. Areas — Status

a. Saying alphabet	Not Needed - Working - Prescribe
b. Recognizing letters of alphabet	Not Needed - Working - Prescribe
c. Writing alphabet	Not Needed - Working - Prescribe
d. Recognizing letters in isolation	Not Needed - Working - Prescribe
e. Recognizing consonant sounds	Not Needed - Working - Prescribe
f. Producing consonant sounds	Not Needed - Working - Prescribe
g. Recognizing blend sounds	Not Needed - Working - Prescribe
h. Producing blend sounds	Not Needed - Working - Prescribe
i. Recognizing short vowel sounds	Not Needed - Working - Prescribe
j. Producing short vowel sounds	Not Needed - Working - Prescribe
k. Recognizing long vowel sounds	Not Needed - Working - Prescribe
l. Producing long vowel sounds	Not Needed - Working - Prescribe
m. Recognizing digraph sounds	Not Needed - Working - Prescribe
n. Producing digraph sounds	Not Needed - Working - Prescribe
o. Conbining sounds to form words	Not Needed - Working - Prescribe
p. Building sight vocabulary	Not Needed - Working - Prescribe
q. Using word-attack skills independently	Not Needed - Working - Prescribe

r. Understanding what is read	Not Needed - Working - Prescribe
s. Showing interest in reading	Not Needed - Working - Prescribe
t. Dictating own story	Not Needed - Working - Prescribe
u. Writing own story	Not Needed - Working - Prescribe
v. Reading back own original story	Not Needed - Working - Prescribe
w. Recognizing words from own story in vocabulary	Not Needed - Working - Prescribe
x. Expressing self clearly and freely	Not Needed - Working - Prescribe
y. Completing oral sentences	Not Needed - Working - Prescribe
z_1 Writing in air (Jastak)	Not Needed - Working - Prescribe
a_1 Tracing letters (Fernald)	Not Needed - Working - Prescribe
b_1 Look-say method	Not Needed - Working - Prescribe
c. Other	Not Needed - Working - Prescribe

2. Materials	Status
a. Readiness	Not Needed - Working - Prescribe
b. Merril Linguistics	Not Needed - Working - Prescribe
c. Sullivan Programmed Read.	Not Needed - Working - Prescribe
d. Grolier Reading Machine	Not Needed - Working - Prescribe
e. Language experience	Not Needed - Working - Prescribe
f. Peabody-Rebus Reading	Not Needed - Working - Prescribe
g. S.R.A.	Not Needed - Working - Prescribe
h. Mott	Not Needed - Working - Prescribe
i. Teacher designed materials	Not Needed - Working - Prescribe
j. Palo-Alto Reading Program	Not Needed - Working - Prescribe
k. Ideal or Imperial Phonics Tapes	Not Needed - Working - Prescribe
l. Library books	Not Needed - Working - Prescribe
m. Reader's Digest	Not Needed - Working - Prescribe
n. Basal Reading Series	Not Needed - Working - Prescribe
o. Talking books	Not Needed - Working - Prescribe
p. Word Lists (Dolch, etc.)	Not Needed - Working - Prescribe
q. Alphabet cards	Not Needed - Working - Prescribe
r. Story filmstrips	Not Needed - Working - Prescribe
s. Jenne Materials	Not Needed - Wroking - Prescribe
t. Continental Press	Not Needed - Working - Prescribe
u. Edmark Reading Program	Not Needed - Wroking - Prescribe
v. Hoffman machines	Not Needed - Working - Prescribe
w. System 80	Not Needed - Working - Prescribe
x. Other	Not Needed - Working - Prescribe

C. Movegenic (Perceptual Motor) Skills

1. Areas	Status
a. Gross Motor	
1. Locomotor	Not Needed - Working - Prescribe
2. Balancing	Not Needed - Working - Prescribe

3. Arm and Shoulder Act.	Not Needed - Working - Prescribe
4. Trunk Exercise	Not Needed - Working - Prescribe
5. Leg & Hip Activities	Not Needed - Working - Prescribe
6. Coordination Activities	Not Needed - Working - Prescribe
7. Body Control	Not Needed - Working - Prescribe
8. Other	Not Needed - Working - Prescribe
b. Fine Motor	
1. Cutting	Not Needed - Working - Prescribe
2. Placing & Pasting	Not Needed - Working - Prescribe
3. Tracing & Coloring	Not Needed - Working - Prescribe
4. Everyday Activities such as buttoning, lacing, tying, etc.	Not Needed - Working - Prescribe
5. Finger tracing, finger painting	Not Needed - Working - Prescribe
6. Weaving activities	Not Needed - Working - Prescribe
7. Art Projects, such as painting, working with clay	Not Needed - Working - Prescribe
8. Other	Not Needed - Working - Prescribe
c. Laterality - Directionality	
1. Left-Right	Not Needed - Working - Prescribe
2. Trace right & left hand	Not Needed - Working - Prescribe
3. Relate to defined space activities	Not Needed - Working - Prescribe
4. Other	Not Needed - Working - Prescribe
d. Eye-Hand Coordination	
1. Batting, hitting, hammering	Not Needed - Working - Prescribe
2. Pencil & Paper activity	Not Needed - Working - Prescribe
3. Tossing, aiming games	Not Needed - Working - Prescribe
4. Placing shapes in designated places	Not Needed - Working - Prescribe
e. Body Image	
1. Body puzzle	Not Needed - Working - Prescribe
2. Paint body figures	Not Needed - Working - Prescribe
3. Simon says	Not Needed - Working - Prescribe
f. Handwriting	
1. Copy forms and designs	Not Needed - Working - Prescribe
2. Paints letters in large form	Not Needed - Working - Prescribe
3. Write in sand	Not Needed - Working - Prescribe

2. Materials	Status
a. Frostig -"Move, Grow, Learn" Activities	Not Needed - Working - Prescribe
b. Kephart - "Perceptual Development Activities"	Not Needed - Working - Prescribe

c. Barset's "Movegenics"	Not Needed - Working - Prescribe
d. Jean Ayres Sensory Integration	Not Needed - Working - Prescribe
e. Valette "Programming Learning Disabilities"	Not Needed - Working - Prescribe
f. Dubnoff, New York Times Teaching Resources	Not Needed - Working - Prescribe
g. Balance equipment	Not Needed - Working - Prescribe
h. Teacher - made material	Not Needed - Working - Prescribe
i. Rhythm instruments	Not Needed - Working - Prescribe
j. Body film strip	Not Needed - Working - Prescribe
k. Mirror - camera	Not Needed - Working - Prescribe
l. Other	Not Needed - Working - Prescribe

Suggested Specific Content Areas for Generic Goals

A. Growth in Cognition

I. Verbal Reasoning — Status

a. Analogies	Not Needed - Working - Prescribe
b. Incomplete stories to be completed	Not Needed - Working - Prescribe
c. Problem solving	Not Needed - Working - Prescribe
d. Discussion of reasons why everyday events occur	Not Needed - Working - Prescribe
e. Opposites	Not Needed - Working - Prescribe
f. Telling time	Not Needed - Working - Prescribe
g. Discussion of seasons, days, months, holidays	Not Needed - Working - Prescribe

II. Abstract Reasoning

a. Puzzles with pictures	Not Needed - Working - Prescribe
b. Analogies	Not Needed - Working - Prescribe
c. Problem solving	Not Needed - Working - Prescribe
d. Object in a "grab bag"	Not Needed - Working - Prescribe
e. Picking out inconsistencies	Not Needed - Working - Prescribe
f. Discussion of world, local, and personal events	Not Needed - Working - Prescribe
g. Other	

III. Sequencing — Status

a. Verbal sequencing of stories	Not Needed - Working - Prescribe
b. Comic Strip Sequencing	Not Needed - Working - Prescribe
c. Other	Not Needed - Working - Prescribe

IV. Patterning — Status

a. Flannel board activities	Not Needed - Working - Prescribe
b. Paper and pencil patterning	Not Needed - Working - Prescribe
c. Object assembly	Not Needed - Working - Prescribe
d. Parquetry blocks	Not Needed - Working - Prescribe
e. Other	Not Needed - Working - Prescribe

V. Categorizing — Status

a. Shapes	Not Needed - Working - Prescribe
b. Size	Not Needed - Working - Prescribe
c. Textures	Not Needed - Working - Prescribe
d. Sorting activities	Not Needed - Working - Prescribe
e. Pictures	Not Needed - Working - Prescribe
f. Solids, liquids, gas	Not Needed - Working - Prescribe
g. Other	Not Needed - Working - Prescribe

VI. Social Reasoning — Status

a. Role playing	Not Needed - Working - Prescribe
b. Incomplete situations to be completed through discussion	Not Needed - Working - Prescribe
c. Reading real life situation stories	Not Needed - Working - Prescribe
d. Discussion of families and the children's relationship to them	Not Needed - Working - Prescribe
e. Other	Not Needed - Working - Prescribe

B. Development of Body Concept
(Good enough DAM general outline should be used.)

I. Identification — Status

a. Body parts separately	Not Needed - Working - Prescribe
b. Integrating parts as as whole	Not Needed - Working - Prescribe
c. Drawing parts of the body	Not Needed - Working - Prescribe
d. Drawing integrated parts of the body	Not Needed - Working - Prescribe
e. Recognizing sex differences	Not Needed - Working - Prescribe
f. Drawing pictures of man and woman	Not Needed - Working - Prescribe

GOAL: Develop Integrated Body Concept

C. Development of Self Concept
(Details will be developed from Eric Form, H. Sullivan's theoretical construct; however, basically children would learn the following:)

I. Identification	Status
a. Self (understands basic emotions such as anger, love, hate	Not Needed - Working - Prescribe
b. Others self (understands how he has been perceived by others	Not Needed - Working - Prescribe
c. Social self (understands his relationship with peers	Not Needed - Working - Prescribe
d. Ideal self (has developed some notion of what he would like to be)	Not Needed - Working - Prescribe

GOAL: Develop Integrated Self Concept

D. Development of Sensory Receptivity

I. Following Directions	Status
a. Felt board activities	Not Needed - Working - Prescribe
b. Musical activities	Not Needed - Working - Prescribe
c. Use of games in a step-by-step procedure	Not Needed - Working - Prescribe
d. Chain-type conditioning	Not Needed - Working - Prescribe
e. Other	

II. Auditory Memory	Status
a. Digit span	Not Needed - Working - Prescribe
b. Simple phrases	Not Needed - Working - Prescribe
c. Sentences	Not Needed - Working - Prescribe
d. Poems, short paragraphs, songs	Not Needed - Working - Prescribe

e. Tape recorded repetitive activities	Not Needed - Working - Prescribe
f. Various directions to be followed accurately	Not Needed - Working - Prescribe
g. Other	Not Needed - Working - Prescribe

III. Auditory Discrimination	Status
a. Environmental sounds	Not Needed - Working - Prescribe
b. Consonant sounds (beginning, medial, ending)	Not Needed - Working - Prescribe
c. Vowel sounds (Long & short)	Not Needed - Working - Prescribe
d. Nonsense syllables vs. sensible ones and discrimination thereof	Not Needed - Working - Prescribe

IV. Visual Memory	Status
a. Checkers- sequence	Not Needed - Working - Prescribe
b. T-scope	Not Needed - Working - Prescribe
c. Map skills	Not Needed - Working - Prescribe
d. Photographs, magazines	Not Needed - Working - Prescribe
e. Art activities	Not Needed - Working - Prescribe
f. Film strips & film-loops	Not Needed - Working - Prescribe
g. Color coding with blocks, etc.	Not Needed - Working - Prescribe

V. Visual Discrimination	Status
a. Finding same type & size	Not Needed - Working - Prescribe
b. Finding different shapes and sizes	Not Needed - Working - Prescribe
c. Finding likes and differences in letters, numbers, people, pictures, situations, etc.	Not Needed - Working - Prescribe
d. Dot-to-Dot activities	Not Needed - Working - Prescribe
e. Hidden picture activities	Not Needed - Working - Prescribe
f. Differences within color sequences	Not Needed - Working - Prescribe
g. Lap Skills	Not Needed - Working - Prescribe

VI. Attention Span	Status
a. Electroscope	Not Needed - Working - Prescribe
b. T-scope	Not Needed - Working - Prescribe
c. Visualizers	Not Needed - Working - Prescribe
d. Timed-tasks increasing time in relation to child's progress	Not Needed - Working - Prescribe
e. Tapes (programmed)	Not Needed - Working - Prescribe
f. Other	Not Needed - Working - Prescribe

E. Development of Therapeutic (Interpersonal) Communication

Principles of basic pragmatic communication will be utilized. General communication dialogues will be taped and discussed to delineate the components of communication, such as:

1. Digital Communication (verbatim)
2. Relationship Communication
3. Hidden Meanings
4. Semantics

GOAL: To reduce the gap between what is said and its meaning.

CENTER STAFF

Center was staffed, consistent with its educational activities based upon specific and generic performance skills necessary for the field of pedagogy as follows:

SPECIFIC SKILLS

1. Digital - Cognitive Area (Skill in the Symbolic Content, i.e., reading, writing, arithmetic).
2. Relationship - Affective Area (Skill in Therapeutic Communication to develop relationship in general and the understanding of dynamics, growth and development of self concept and pragmatics of human communication).
3. Movegenic - Psychomotor Area (Skill in fostering body concept through movegenic activities).

GENERIC SKILLS

4. Classroom Management Skill (Group dynamics, physical structure of classroom signal system, etc.).
5. Assessment Skill (Formal and informal observation and record maintenance).
6. Problem Solving Skill (Listening, rephrasing, non-categorization, categorizing, synthesizing, analyzing, etc.).

It was also expected that all professional personnel had or would develop cognitive competence in the following areas:

7. Theoretical rationale related to Child Growth and Development (particularly theories generated by Erickson, Piaget, Gessell, etc.).

3. Dynamics of Psycho-social Context and its effect on the education process.

PROPOSED CENTER STAFF
AND THEIR REFORMULATED ROLES

1. Two* Educational Practitioners (teachers) with primary skill in Digital-Cognitive area and secondary skill in affective and/or psychomotor areas.
2. One Educational Practitioner (teacher) with primary skill in Relationship-Affective area and secondary skill in Digital-Cognitive areas and/or Psychomotor area.
3. One Educational Practitioner (teacher) with primary skill in Movegenic-Psychomotor area and secondary skill in Affective and/or Digital area.
4. Two Para-Professionals with primary skill in assisting classroom and behavior management as well as maintaining daily records of children's behavior.
5. One** Program directional advisor with skill in monitering the educational program, cognitive understanding of developmental aspects of brain behavior relationship and dynamics of Psycho-social context and its effect on educational process.

---

* Center proposed to serve approximately 40 children at a time and also function as a training unit.

** It was advised to seek three advisors, one with skills in monitering the educational program, one with cognitive competence in developmental aspects of brain behavior relationship, and one with competence in the psycho-social aspects. However, due to financial constraints and institutional limitations, one one advisor served.

DESCRIPTION OF PROCEDURES FOR IMPLEMENTATION OF ACTIVITIES

Once the referral had been made by the appropriate referring unit, the staff at the Center had reviewed the pertinent information and prepared a profile from intake application (See Appendix A for Intake Form) before planning specific activities.

Planning of intervention techniques was done (1) in congruence with the needs shown on the child's profile, (2) to foster behavior adaptation and learning acquisitional skills appropriate to functioning level and chronological age, (3) to facilitate educational activities at school and home. (See the Project's Strategy Flow Chart - Figure 1).

PERSONNEL RESPONSIBLE FOR ACTIVITIES

The day to day educational program was implemented under the direction of the Educational Advisor, Principal, and the Teacher Advising Committee. The following chart described important activities and responsible personnel.

CHART: PERSONNEL RESPONSIBLE FOR ACTIVITIES

Activities	Responsible Personnel
1. Referral Review.	1. Staff in the Center and Principal.
2. Assessment and preparation of functional profile of the case.	2. Center Staff and Appropriate Regular Classroom Teacher.
3. Plan an Intervention Program based on child's profile.	3. Center Staff and Appropriate Regular Classroom Teacher.
4. Implementation of Planned Services in the Center.	4. Center Staff according to roles described on page 28.
5. Implementation of Services in the home.	5. Teacher and Guidance experience and Parents under the overall cooperation and direction of Center Staff and Educational Board.
6. Implementation of Services in the regular classroom.	6. Regular Classroom Teacher with the help of Center's Staff.

Expected Outcome:

The expected outcome of the educational program was to be determined by the specific reason for each referral. The basic outcome included the following:

(1) More successful functioning of Exceptional Children in a regular classroom setting (regular class placement or special class placement- within the regular school) based on regular classroom teacher feedback.

(2) Integration of psycho-educational services in the regular classroom.

(3) Directional change in overall orientation form - dichotomized to integrated.

(4) Reduction in referrals to various services such as M.R., L.D., E.D. Speech.

EXAMPLE DAILY SCHEDULE
TYPICAL DAY

	Activities	Content
A.M.	1. Two (2) children being assessed.	1. To be selected from the diagnostic battery according to the individual case.
	2. Four (4) children receiving educational services	2. Based on information gathered through assessment. Content will include: (1) modified behavior adaptation, (2) development of acquisitional skills in the Center and in the parents' home.

	Activities	Content
	1. Working with Parents	1. Familiarizing parents with material and techniques used at the Center.
	2. Staffing and Case Conference	2. Preparation of educational program to match child's needs as shown on his profile.

Actual time spent in the Center varied and depended upon the problem and its degree of severity. Children were seen up to three hours a day and up to five days a week.

The Center was open on an annual basis. The average length of time for a child to be involved at the Center on a scheduled basis was three months. However, some children participated on a regular basis for a much longer period of time.

PARENT-FAMILY PARTICIPATION

One of the major goals of this project was to involve the parents or parent-substitute in the implementation of the total-push program designed for each exceptional child at the Learning Center. It was proposed that the usual services be provided parents by the Center, such as therapeutic communication and information concerning child development. However, it is believed that in order to be maximally effective in preparing a child for successful integration into the regular educational mainstream of his community, a plan of action must be developed that impinges on every major facet of his life, and this most definitely includes the child's life within his home. It was a basic prerequisite of admission into the present program that a parent agree, at least in principle, to this philosophy. To implement this objective of parent involvement, the following parental activities were proposed:

1. During the initial D & E phase the parents of prospective Center children were asked to assist in the development of as complete a profile of the child's strengths and problem areas as possible. This involved at least an initial intake interview and an introduction to the Center Staff. During these early meetings the parents were made aware of the nature of the Center's program.

2. From time to time during the program implementation phase, the parents were asked to participate in some aspect of their child's activities- in the role of an assistant teacher. Though the nature of this participation was based in large part on the readiness and motivation of

the individual parent. The experience, it was hoped, would allow the parent to confront the expectations that would be placed on him by the Center, not in terms of an evaluative dimension, but rather in terms of a truly cooperative venture in meeting the problems of children.

3. When a child nearing the point where he was about to be placed within a more permanent educational setting (regular classroom), his parents were asked to meet with the Home-bound clinical teacher and other staff to discuss the kinds of program carry-over that might be implemented at home. This carry-over included two major components. First, it included educational-related training exercises agreed upon jointly by the Clinical teacher and the parent; second, it included making parents aware of behavior management principles through the use of existing programmed material developed by such workers as Patterson (1968) and Becker (1971).

4. The parent was assisted in setting realistic goals for the child in carrying out the actual instructional program, in use of behavior management techniques facilitating the development of behavior more campatible with successful and efficient learning and in more closely observing the behavior of the child so the parent would be better able to know what was working and what was not working.

5. Each parent with a child being served by the IPEC was invited to join a parent group where parents were encouraged to discuss their particular problems currently being faced with other parents who very likely had faced similar problems. Each major staff member was responsible for interacting with at least one parents' group.

6. All parents were to be invited to attend the evaluation workshop at the end of the first year's activities, during which time they

would have contributed to an understanding of how closely the Center was able to come to reaching each of its major goals, how to make the Center more effective, and how to make the Center's activities exportable. However, this activity was curtailed due to lack of funds.

EVALUATION

Procedures were utilized to evaluate the effectiveness of the total program as well as the effectiveness of each program component. (See Conceptual Model Figure A, Page 9).

Project-wide goals: Assessment was made of the Center Children's level of starting behaviors, in-process behaviors, and end-point behaviors through the use of standardized and informal test devices listed in Appendix B. These assessments were made at the time of intake, at the end of the Learning Center phase, and again at the end of the first project year.

Referral Phase: Records were kept of the total number of referrals made from each referral source, including any significant changes in the frequency of referrals during the project year. (See Appendix A). Intake procedures were evaluated in terms of their usefulness and predictive qualities as they related to other Center program components.

Diagnostic Phase: An attempt was made to develop diagnostic procedures that were functional parts of the program design activities of the Center staff. For instance, measurement instruments were used that directly related to specific curriculum goals.

Staff Training: Evaluation was made of the efficacy of the pre-training orientation workshops, case conferences, on-going independent study and the final evaluation workshop through the use of appropriate questionnaires and checklists. (See Apprendix A). In addition, assessment was made of student's performance through the use of supervisor's evaluation forms based on observations of student's performance while engaged in various Learning Center activities.

Learning Center Program Design Phase: A detailed record was kept of each master program designed for the Center children. Pre and post-assessments were made of the performance of the Center children by use of the diagnostic battery described in Appendix B. In addition, curriculum related tests were administered by the clinical teacher in the classroom.

Family Participation: General acceptance of the Learning Center program by participating families was assessed through the use of a standardized interview administered at the end of the project year. In addition, process notes in the form of a log book were kept by the Center staff detailing all contact with each family. All parents were to have attended the end-of-year evaluation workshop. However, as previously stated, due to financial limitations, the workshop was cancelled.

Educational Placement: The clinical teacher based at home was responsible for keeping a complete account of the progress of the Center children in their educational placement settings. In addition, each participating agency was supposed to be given the opportunity to assess the effectiveness of the Center from their own point of view through the use of a structured interview. Unfortunately however, due to financial constraints, this activity was not carried out.

Progress of Continuation Activities: A complete record was kept of all contacts made with community agencies by the staff on behalf of the Learning Center (including visitors, oral presentations, written materials such as brochures, etc.).

Demonstration: Through members of the Advisory Council (See Page 39) invitations were to be extended to other schools and Except ional Child Programs throughout the County in the beginning and other counties and appropriate agencies during the subsequent years to visit

the Center and to attend one or more of the Advisory Council meetings.

A videotape showing a typical day of operation was to have been prepared and used to acquaint appropriate individuals and groups with an overall picture of the Center's intake conference, testing session, treatment of problem, placement, and parent involvement programs.

A brief brochure depicting the total program was to have been prepared and disseminated to interested agencies and individuals.

All of these activities were carried out on a "single shot" basis, but again, unfortunately due to financial and institutional constraint, these activities were curtailed.

Replication: There were several methods by which the staff of the Learning Center worked towards replicating its activities in other settings. First, a series of planned interactions with individuals in positions of leadership within the general region were to visit the Learning Center with the purpose of being provided a demonstration of how to carry out a program that will maximize successful integration of exceptional children into mainstream educational settings. Twenty such educational leadership persons were to have been invited to the Center for a full day of interaction with the staff, children, and families of the program. In addition, the Education Advisor and the Principal of the School were to have maintained contact with these visitors after they had returned to their work setting and to attempt to assist them in any way they could to implement programs consistent with the Learning Center philosophy.

Second, a concerted effort was to have been made by the entire Center staff to involve other leadership within Polk County communities in

Center activities. Again, most of these activities were seriously curtailed due to financial and institutional constraint.

ADVISORY COUNCIL

An Advisory Council was established to assist the project staff in the planning and the implementation of the total program. Each member of the Council was carefully selected to provide significant input into a different phase of the program. It was intended that the Council perform its function in a vital and continuing manner; therefore, a series of activities involving the council members were to have been planned to guarantee the desired high level of effectiveness. First, all council members were to have been involved in the initial orientation activities planned for the entire staff. Second, council members were to have attended quarterly meetings carried out at the Center when they would be briefed as to the current activities of the Center and where they would be involved in brainstorming sessions for the resolution of the pressing problems. Finally, the entire council was to have participated in a three day evaluation workshop involving the Center staff to have been held immediately following the first year of operation in June, 1977. Again, unfortunately these activities were curtailed.

1. Mr. R.C. Churchwell
   Area Superintendent

   Mr. Churchwell co-chaired the council meetings with Mr. Dan Pierce. He also provided general administrative input to enhance the integrated psycho-educational service for the children.

2. Mr. Dan D. Pierce
   Principal

   Mr. Pierce provided information to the Council regarding the general activities of the program. He sought suggestions

from the members of the Council for the success of the project. He also worked as a liaison between project staff and advisory council.

3. Mr. James Miles
Director Teacher Educational Center

Mr. Miles provided information regarding the assistance available through the Teacher Education Center. He made every effort to make project staff development activities suit the master plan. He also helped in discriminating information about the progress of the project.

4. Mrs. Doris Sanders
Director Exceptional Child Program

Mrs. Sanders provided input in regards to state guidelines for exceptional children. She also disseminated information to State Exceptional Child Program about the progress of the project and recommended new strategies for exceptional children in the regular classroom.

5. Parent - Mrs. John York

Mrs. York acted as a liaison between project and parent groups. She sought and provided information regarding parents' concern and made efforts and recommendations for activities to develop parental cooperation.

6. Mrs. Kay Sampson
Teacher

Mrs. Sampson acted as a liaison between project and teachers. She provided to the council members the teachers' recommendations and concerns.

7. Reverend John Elliott
Community Representative

Reverend Elliott acted as a liaison between community and project. He provided input regarding community input and sought support for the project.

STAFF AND JOB DESCRIPTION

A. Educational Advisor

1. Overall direction of project.

2. Review from time to time Planning Committee activities, chair monthly Center Staff and Teacher Advisory Committee meetings and year-end evaluation workshop.

3. Supervise replication activities in other settings within the County if and when needed.

4. Coordinate demonstration and dissemination activities including local coverage, regional and national dissemination and outside visitor workshop program.

5. Direct orientation workshop, Independent study and other in-service training activities.

B. Principal

Administration officer on site, responsible for daily administrative duties including the following:

1. Overall direction of project to make sure each component meshes into total project.

2. Fiscal responsibility.

3. Development and maintenance of contacts with cooperating units, i.e., Exceptional Child Education Program, Teacher Education Center, etc.

4. Participate in Center Staff meeting as co-chairman.

5. Co-chair Advisory Council Meeting.

6. Responsible for development of information flow internally from component to component and externally from Center to Community and back again.

C. Center Coordinator

1. Center coordinator, development of comprehensive plan for each child.

2. Chair Planning Committee meetings having to do with curriculum design and implementation.

3. Maintenance of day-to-day contacts with regular classroom teachers.

4. Supervise activities of project children in education settings.

D. Clinical Teacher - Classroom Based

1. Responsible for day-to-day implementation of Learning Center based component of master program for each project child.

2. Responsible for afternoon work sessions in designing specifics for following day's activities.

3. Participate in all Center staff meetings.

4. Supervise day-to-day maintenance of records of children's activities at Learning Center.

5. Participate in parent activities at Learning Center including parents' work in classroom with children.

E. Clinical Teacher - Home Based

1. Responsible for day-to-day implementation of Learning Center based component of master program for each project child.

2. Responsible for afternoon work sessions in designing specifics for the following day's activities.

3. Participate in all Center staff meetings.

4. Maintenance of records of children's activities at home.

5. Work with parents in the implementation of the educational component of the master plan as it is carried out in the home.

F. Evaluation Coordinator

1. Supervise collection of data including information from diagnostic and evaluation sessions.

2. Provide data for in-house and external information dissemination (publications).

3. Assist in development of scales and questionnaires.

G. Secretary

1. Responsible for production of materials to be used in all phases of project, school and home related activities, information dissemination, reports, etc.

2. Maintain fiscal records.

3. Receptionist and contact person always available. (8-4, five days a week).

4. Regular secretarial duties, typing, dictation, etc.

5. Responsible for keeping schedule of project-wide activities and activities of all project personnel.

6. Maintenance of information storage, such as case records of each child.

TRAINING OF PERSONNEL

The following activities were proposed:

1. Orientation Week which included the following:

   a. Two day orientation training workshop for internal staff to discuss the Center's goals, procedures, cooperating referral units (regular classroom, Exceptional Child Program), present operational status, educational intervention materials, evaluation procedures to be used, roles of the staff, parent participation and staff development.

   b. One day workshop for all cooperating unit representatives (k-5 regular classroom teachers, Exceptional Child Education Program Director, TEC) including an afternoon session for the members of the Advisory Council.

2. Ongoing in-service for Center staff and regular classroom teachers.

   a. Demonstration of activities in the Center.

   b. Continuous independent study in generic and specific skills and theoretical bases as described on page 26.

3. Staff Meetings

   Weekly staff meetings were held to evaluate the progress of the Center and of each child individually, to discuss any problems that had arisen and for in-service training relative to the educational evaluation and programming of the children being served.

4. Involvement in Professional Organizations.

   Staff involved themselves in local, state and national professional organizations, (C.E.C., A.A.M.D., N.A.E.Y.C., P.A.R.C. local, etc.).

5. Department of Special Education Consultants

The staff utilized the services of consultants from the Department of Speical Education at the University of South Florida whenever and wherever needed as well as local available expertise within the school system.

TIMETABLE

Activities	Dates	Status
Initial investigation and contacts made including surveying the need for such educational services.	August, 1974 til March,1976	Completed
Securing space for educational Center	Sept. 14, 1975	Completed
Implementation of educational services on limited basis	Oct., 1975 - June, 1976	Completed
Informal continuous contact with initial cooperating units, i.e., Exceptional Child Education and TEC, etc.	Continuous	Continuous
Orientation Week (Development of In-service training of Staff and orientation for Advisory Council	August, 1976	Completed
Identification and assessment of Children* - Phase I	August and Sept., 1976	Completed
Curriculum Planning	On continuous Basis	Begun March, 1976. Extensive work begun Aug., 1976 when project was funded.
Evaluation Component	August, 1976	Completed with proposal submitted to School Board

* However, assessment was an on-going activity (See Strategic Plan of Center Operation).

Activities (cont.)	Dates	Status
Parent Participation Program 1-General Plan	April, 1976	Completed
2-Extensive Involvement	Aug., 1976 - June, 1977	Completed
Advisory Council 1-Initial Phase (Members were chosen).	March, 1976	Completed
2-Formal Orientation	Aug., 1976	Completed
3-Continuous Involvement	Quarterly	Completed
Training for Others 1-Parents	Beginning Aug., 1976 on continuing basis	Completed
Annual Evaluation Workshop	June, 1977	Unable to complete as planned
Continuation of Project	Aug. 1977-78	Pending with modification based on evaluation
Continuation of Project	Aug., 1978-79	Begin the Phase out of Learning Center

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APPENDIX - A

EVALUATION SCALES

Feedback Rating Scale (FRS) *

During the past _____, you have been involved in an _____
(Provide time duration, i.e., week, month, etc.) (Name major activity component,
i.e., woekshop, ind. study, etc.) _____. The _____ was intended to 1) _____
(component) (Provide major objectives)
2) _____. The following major topics/activities were discussed/presented. Each topic/activity has three parts (level of presentation and discussion, importance of topic/activity, and level of comprehension). Please rate all three on the five point scale.

	Level of Presentation & Discussion					Importance of Topic					Level of Comprehension				
	Far Below Average	Below Average	Average	Above Average	Far Above Average	Extremely Unimportant	Importance	Aver. Import.	Above Average Importance	Ext. Important	Far Below Average	Below Average	Average	Above Average	Far Above Average
1._____	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
2._____	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
3._____	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
4._____	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
5._____	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5

* *Conceptual outline taken from Singh, S. P., "Interdisciplinary Seminar for the Prevention of Learning and Behavior Problems Among Young Children," ED 097 790, EC 070 240, Research in Education, ERIC, 1973.

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This scale concerns feedback from you on your professional aspirations, professional development, professional involvement, program appraisal, and content appraisal. Please answer all applicable questions as candidly as possible.

Please note that on a 1-5 scale, for the purpose of current feedback, "1" has no negative connotation and "5" has not positive connotation. The scale is to sample the realities. Your real appraisal will facilitate further development of programs for exceptional children.

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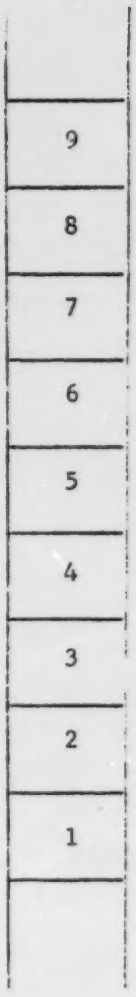
* SINGH, S.P. Follow Up Study: Early Intervention Program, Research in Education, ERIC, ED 097-795, EC 070 369, March 1974.

I. PROFESSIONAL ASPIRATIONS

Here is a picture of a ladder. Suppose that the top of the ladder (step 9) represents the best possible employment situation for you and the bottom represents the worst possible employment situation.



1. Where on the ladder do you feel you personally stand <u>at the present time</u>? Step number _____.

2. Where on the ladder would you say you stood <u>one year before entering the program</u>? Step number _____.

3. Where on the ladder would you say you will stand <u>five years from now</u>? Step number _____.

Looking at the ladder again, suppose your greatest hopes for your profession are at the top and your worst fears at the bottom.

4. Where would you put your profession on the ladder <u>at the present time</u>? Step number _____.

5. Where did your profession stand <u>one year before entering the program</u>? Step number _____.

6. And just as your best guess, where do you think your profession will be on the ladder <u>five years from now</u>? Step number _____.

II. PROFESSIONAL DEVELOPMENT

Directions: Please check your level of involvement with professional organizations (by geographical distribution) both before entering the program and after being involved with the program (1-none, 2-low, 3-average, 4-moderate, 5-high).

	Before Entering the Program					After Entering the Program				
	none	low	aver.	moder.	high	none	low	aver.	moder.	high
1. Local										
2. State										
3. National										
4. International										

III. PROFESSIONAL INVOLVEMENT

Directions: Please check your level of involvement with the following groups both before entering the program and with program.

	Before Entering the Program					After Entering the Program				
	none	low	aver.	moder.	high	none	low	aver.	moder.	high
1. Parents										
2. Teachers										
3. Community										
4. Any Other (specify)										

PROGRAM APPRAISAL

Directions: During the staff development program you were involved in the areas listed below. Each area has two parts (Importance in Program and Importance on Job). Please check both parts for each area on a 1-5 scale (1-extremely unimportant, 2-below average importance, 3-average importance, 4-above average importance, and 5-extremely important).

Name of Staff Development Component	Importance in Program					Importance on Job				
	extremely unimportant	below average importance	average importance	above average importance	extremely important	extremely unimportant	below average importance	average importance	above average importance	extremely important

V. EDUCATIONAL CONTEXT OF TARGET PERFORMANCE - CONTEXT APPRAISAL

Directions: Based on your direct or indirect professional experiences with children since graduation, please appraise the following by circling a number on the 1-5 scale (1-extremely unimportant, 2-below average importance, 3-average importance, 4-above average importance, 5-extremely important.)

1. Cognitive:

1 2 3 4 5 A. Directed thought activities (problem solving, following directions, persevering).

1 2 3 4 5 B. Non-directed thought activities (fantasizing, free association, role playing).

1 2 3 4 5 C. Symbols (words, mathematical concepts, signs).

1 2 3 4 5 D. Sensory stimulation (color, shape, size, texture, spatial, temporal, and functional relationships).

1 2 3 4 5 E. Health, nutrition, and personal grooming (knowledge and practice).

2. Perceptual and Motor Development:

1 2 3 4 5 A. Eye-hand coordination.

1 2 3 4 5 B. Visual discrimination.

1 2 3 4 5 C. Auditory discrimination.

1 2 3 4 5 D. Kinesthetic awareness of position in space (directionality, laterality, balance, locomotion, receipt and propulsion skills).

3. Communication Skills.

1 2 3 4 5 A. Verbalization (needs, problem-solving procedures, emotions).

1 2 3 4 5 B. Self-expression (creativity, music, art, movement).

1 2 3 4 5 C. Linguistic skills (communication with adults and older children).

V. TEACHER CONTENT APPRAISAL (continued)

4. Emotional and Social Development:

1 2 3 4 5 A. Cooperation with peers (games, activities, possessions)

1 2 3 4 5 B. Assumes responsibility (actions, others, objects)

1 2 3 4 5 C. Sublimates anger and/or channels frustration toward positive reactions

5. Behavior Modification:

1 2 3 4 5 A. Positive reinforcement

1 2 3 4 5 B. Negative reinforcement

1 2 3 4 5 C. Punishment

1 2 3 4 5 D. Immediate reinforcement

1 2 3 4 5 E. Systematic reinforcement

1 2 3 4 5 F. No reinforcement

6. Procedures for Establishing Rapport with Children:

1 2 3 4 5 A. Informal dress (mobility and flexibility)

1 2 3 4 5 B. Physical contact with children

1 2 3 4 5 C. Direct eye contact with children

1 2 3 4 5 D. Any other (specify) _____

_____

_____

_____

Appendix B

Ceneral Outlines and Questionaires
Utilized During 1975-1976 Staff
Development Activities

TOPIC

Concept of Mainstreaming

October 10, 1975

Suggested Time Table

9:00 - 9:30	Coffee
9:30 - 9:45	Pre-feedback
9:45 - 10:15	Introduction of topic (Dr. Singh) Historical Perspective
10:15 - 10:30	General Questions from the group
10:30 - 11:15	Small group discussions
11:15 - 11:30	Syntheses of small group discussion by group leaders
11:30 - 1:00	Lunch
1:00 - 1:30	Feedback to group (Dr. Singh)
1:30 - 2:15	Small group discussion on a) Mainstreaming and implementation b) Teacher's concern cO Teacher's suggestion
2:15 - 2:30	Syntheses of small group discussion by group leaders
2:30 - 3:00	Concluding rewards and suggested directions (Dr. Singh)

Pre-Feedback Form

Please briefly describe the following:

1. Express your feelings about mainstreaming.

2. Provide a definition of mainstreaming.

Suggested Criteria For Critical Evaluation of Some Mainstreaming Models:*

1. Does the model recognize and provide for a Continuum of programs ranging from all day self cantained to remediatory in the regular classroom for children who without being "pulled out" are experiencing difficulty?

2. Does the model consciously work towards and actually accomplish reduction of "pull out" programs? Some profess to, but it doesn't seem to happen.

3. Does the model call for specialists to work in regular classroom as much as possible?

4. Does the model encourage regular classroom personnel to use special classrooms and equipment?

5. Does the model concentrate on assisting classroom teachers to increase skills in appraisal, remediation, and individualizations?

6. Does the model provide for an on-going, meaningful staff-development which is oriented towards practicum and seminar work among staff?

or

7. Does the model involve the principal and other related administration personnel in such a way that they are intimately involved as educational leaders in the staff development and special education programs?

8. Is cross-fertilization between schools within and/or across district lines encouraged so that teachers are observing other classrooms - exchanging ideas and moral support?

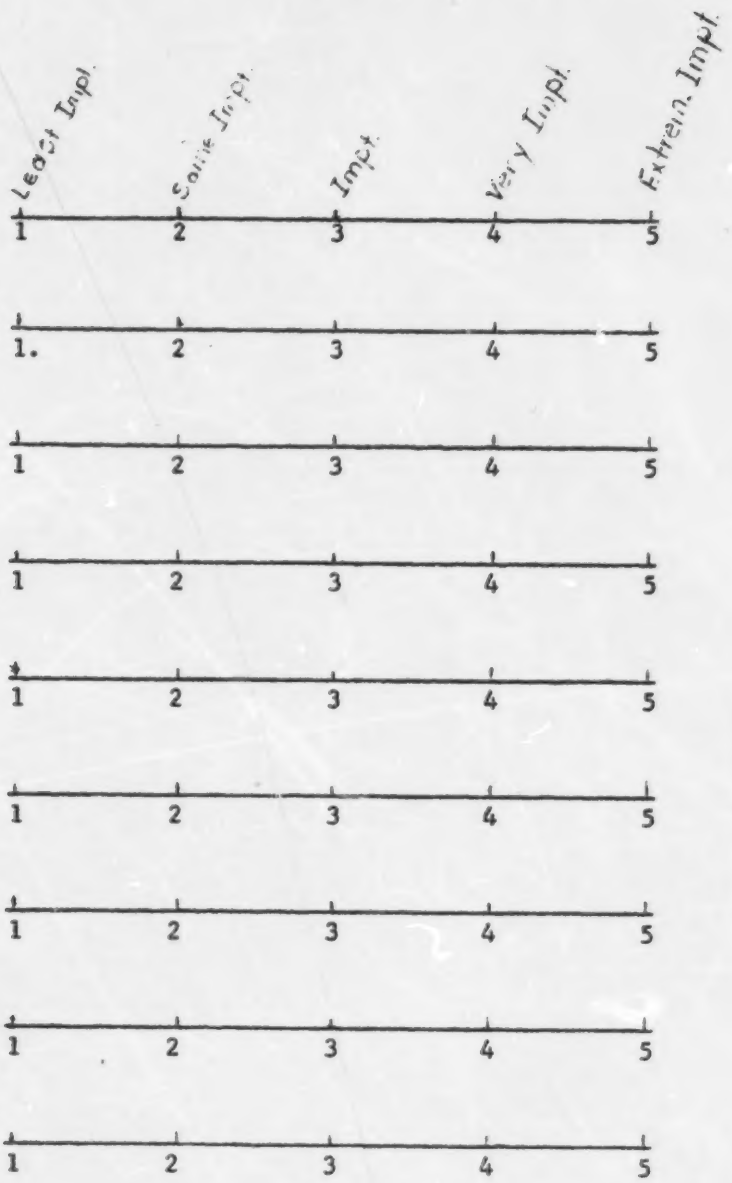
9. Are interrelationship between the school and local colleges encouraged so that interns and professors are working in the school?

Keith E. Beery, Models for Mainstreaming, Dimensions Publishing Company, San Rafael, Calif., 1972.

Criteria for Critical Evaluation of Some Mainstreaming Models

Feedback Form

Criteria #



Suggested Definition of Mainstreaming

Mainstreaming is a process of reducing isolation of individuals (Children, classroom personnel, school administration, teacher training personnel) in the field of education, pooling of educational resources (personnel and materials), development of skills in appraisal remediation, pre and post intervention techniques and understanding of dynamics of such a process in various social context.

Keeping the above definition in mind please rate the importance of each component on a five point scale.

Feedback Form

Please rate the importance of the following component for the success of mainstreaming concept on a five point scale. *See Code

I. Process of Reduction of Isolation of Educational Personnel

Psychological	1	2	3	4	5
Sociological	1	2	3	4	5
Administrative	1	2	3	4	5
Any Other_____ (specify)	1	2	3	4	5

II. Pooling of Resources

Classroom Materials	1	2	3	4	5
Audio-Video Materials	1	2	3	4	5
Any Other_____ (specify)	1	2	3	4	5

III. Skill Development in Appraisal of

Developmental Learning Problems	1	2	3	4	5
Behavior Problems	1	2	3	4	5
Problems Related to 3R's	1	2	3	4	5
Any Other_____ (specify)	1	2	3	4	5

*CODE: 1 - Least Important
2 - Some Importance
3 - Important
4 - Very Important
5 - Extremely Important

IV. Skill Development in Remediation

Skills in Reading	1	2	3	4	5
Skills in Math	1	2	3	4	5
Skills in Writing	1	2	3	4	5
Any Other _____ (specify)	1	2	3	4	5

V. Pre and Post Intervention Technique

Classroom Behavior Management	1	2	3	4	5
Classroom Physical Structure Management	1	2	3	4	5
Small Group Dynamics (N= 5 to 10)	1	2	3	4	5
Large Group Dynamics (N=15 to 35)	1	2	3	4	5
Any Other _____ (specify)	1	2	3	4	5

VI. Understanding the Dynamics of Social Context

Dynamics of Social Policy Decisions	1	2	3	4	5
Social Forces and Parental Involvement	1	2	3	4	5
Any Other _____ (specify)	1	2	3	4	5

Any Other Comments

TOPIC

Classroom Management and Assessment Skills

February 9, 1976

Suggested Time Table

9:00 - 9:15	Coffee
9:15 - 9:25	Introduction
9:25 - 9:55	Santa Monica Project (Film)
9:55 - 10:25	General Discussion on Film
10:25 - 10:40	Coffee Break
10:40 - 11:15	Early Recognition of Learning Disabilities (Film)
11:15 - 12:00	General Discussion on Film
12:00 - 1:00	Lunch
1:00 - 1:30	Glasser on Discipline (Film)
	General Discussion on Film

FEEDBACK FORM

Please rate the importance of the following activities on a five-point scale.

	*See Code
1. Topic Classroom Management and Assessment Skills	1 2 3 4 5
2. Santa Monica Project (Film)	1 2 3 4 5
3. Early Recognition of Learning Disabilities (Film)	1 2 3 4 5
4. Glasser on Discipline (Film)	1 2 3 4 5
5. General Discussion on Topics and Films	1 2 3 4 5
6. Suggestion for Future Workshops	

*CODE: 1 - Least Important
2 - Some Importance
3 - Important
4 - Very Important
5 - Extremely Important

APPENDIX C

Preliminary Application

for

James E. Stephens Elementary School

Preliminary Application for James E. Stephens Elementary School
Bartow, Florida

Name _____

Address _____

Date _____

I. Would you like to be considered for the teaching team of the forthcoming new school? ___yes/no___. (If your answer is affirmative, please continue to answer other questions; however, if your decision is not affirmative, you may stop here and turn in this application to Mr. R. C. Churchwell via Mr. Dan Pierce, by January 16, 1976)

II. List the subject matter, area or grade level, for which you are interested in being considered.

III. Please suggest at least two main objectives you would like to achieve for your learners. (Use extra sheet of paper if necessary.)

IV. List at least two reasons for applying for a position at James E. Stephens Elementary School.

Preliminary Application for James E. Stephens Elementary School
page 2

V. Indicate your preference. (The organizational pattern for elementary age students which you consider most effective.)

1. Open school _____
2. Team teaching _____
3. Self contained _____
4. Multiple age grouping _____
5. Non-graded (continued progress) _____
6. Multiple achievement grouping _____

Please briefly describe your reasons for order of preference.

VI. Please state at least two main objectives you would like to achieve for your own personal and professional growth. (Please use extra sheet of paper if necessary.)

Preliminary Application for James E. Stephens Elementary School
page 3

VII. Suggest at least two procedures for developing communication among your colleagues (other teachers and principal).

VIII. Suggest some of the extra curriculum material you need in order to be effective as a teacher in the new school.

IX. Any other comments or suggestions:

Appendix D

Need Assessment Data

Polk County Teacher Education Center Teacher Training Needs Analysis 1976 - Ranks

Program Responses for School # 530941 Program # 1

Bartow Elem.

Total Value, Rank, and Ques No.

By Rank and By Ques No.

Ques		Rank	Value	Ques No.	Ques No.	Value	Rank		
Math: Measurement Metric	# 55	1	6	11	1	42	32	Reading-Develop Interest	# 35
Teach Learning Disab Stu	# 89	2	9	28	2	47	37	Pre-Requisite Readiness	# 37
Teach Spec Ed Student	# 85	3	12	26	3	31	21	Word Recognition Skill	# 39
Health: Drug/Drug Abuse	# 71	4	17	19	4	31	22	Comprehension Skills	# 41
Teach Reluctant Learner	# 87	5	18	27	5	34	23	Reference & Study Skills	# 43
Ed MHAS & Prog Eval Obj	#113	6	19	40	6	29	16	Adapt Mats Content Areas	# 45
Teaching Gifted Gifted S	# 91	7	20	29	7	54	40	Math: Teach Whole Nos.	# 47
Prescriptive Techniques	#109	8	22	38	8	45	35	Math: Teach Fractional No	# 49
Under District Services	#111	9	22	39	9	44	33	Math: Teach Problem Solving	# 51
Science: Environment Educ	# 67	10	23	17	10	29	17	Math: Teach Geometry	# 53
Art: Criticism of Art	# 81	11	25	24	11	6	1	Math: Measurement Metric	# 55
Diag Knowl & Abil Psycho	#107	12	26	37	12	36	26	Lang Arts: Writing Skills	# 57
Org Curric & Classroom	# 95	13	27	31	13	49	38	Lang Arts: Listening Skil	# 59
Team Planning & Teaching	# 93	14	28	30	14	40	30	Lang Arts: Oral Lang Skil	# 61
Und/Appl Resear Dev Alte	#103	15	28	35	15	36	27	Lang Arts: Children's Lit	# 63
Adapt MAIS Content Areas	# 45	16	29	6	16	50	39	Science Process Skills	# 65
Math: Teach Geometry	# 53	17	29	10	17	23	10	Science: Environment Educ	# 67
Career Educ Concepts	# 75	18	29	21	18	45	36	Health: Growth/Development	# 69
Art: Production of Art	# 83	19	29	25	19	17	4	Health: Drug/Drug Abuse	# 71
Music: Singing/Instrument	# 79	20	30	23	20	44	34	Social Studies Content	# 73
Word Recognition Skill	# 39	21	31	3	21	29	18	Career Educ Concepts	# 75
Comprehension Skills	# 41	22	31	4	22	34	24	Music Skills-Rhythm, Melo	# 77
Reference & Study Skills	# 43	23	34	5	23	30	20	Music: Singing/Instrument	# 79
Music Skills-Rhythm, Melo	# 77	24	34	22	24	25	11	Art: Criticism of Art	# 81
Select/Dev/Use/Eval Mats	# 99	25	25	33	25	29	19	Art: Production of Art	# 83
Lang Arts: Writing Skills	# 57	26	36	12	26	12	3	Teach Spec Ed Student	# 85
Lang Arts: Children's Lit	# 63	27	36	15	27	18	5	Teach Reluctant Learner	# 87
Diag Knowl & Abil Cogn	#105	28	36	36	28	9	2	Teach Learning Disab Stu	# 89
USF Arts & Crafts Content	# 97	29	38	32	29	20	7	Teaching Gifted S	# 91

Lang Arts: Oral Lang Skil	# 61	30	40	14	30	28	14	Team Planning & Teaching	# 93
Using Aids & Volun Instr	#101	31	41	34	31	27	13	Org Curric & Classroom	# 95
Reading-Develop Interest	# 35	32	42	1	32	38	29	Use Arts & Crafts Content	# 97
Math: Teach Problem Solvi	# 51	33	44	9	33	35	25	Select/Dev/Use/Eval Mats	# 99
Social Studies Content	# 73	34	44	20	34	41	31	Using Aids & Volun Instr	#101
Math: Teach Fractional No	# 49	35	45	8	35	28	15	Und/Appl Resear Dev Alte	#103
Health: Growth/Developmt	# 69	36	45	18	36	36	28	Diag Knowl & Abil Cogn	#105
Pre-Requisite Readiness	# 37	37	47	2	37	26	12	Diag Knowl & Abil Psycho	#107
Lang Arts: Listening Skil	# 59	38	49	13	38	22	8	Prescriptive Techniques	#109
Science Process Skills	# 65	39	50	16	39	22	9	Under District Services	#111
Math: Teach Whole Nos.	# 47	40	54	7	40	19	6	Ed Meas & Prog Eval Obj	#113

Polk County Teacher Education Center Teacher Training Needs Analysis 1976 - Ranks

School # 530941
Bartow Elem. Total Generic

Total Value, Rank, and Ques No.
By Rank and By Ques No.

Ques		Rank	Value	Ques No.	Ques No.	Value	Rank		
Diag/Eval Soc Emot Char	# 17	1	4	9	1	9	11	Sel Write Goals & Obj	# 1
Stand Tests Interp Data	# 13	2	5	7	2	6	4	Sel Adapt Dev Mat & Acti	# 3
ID Behav Prob & Solution	# 19	3	5	10	3	8	7	ID Need Plan Indiv Diff	# 5
Sel Adapt Dev Mat & Acti	# 3	4	6	2	4	10	12	Ind Instr Maint Rec Perf	# 7
Class Discus Quest Tech	# 11	5	6	6	5	8	8	Motiv & Reinf Students	# 9
Dev Self Conc Attit Val	# 21	6	6	11	6	6	5	Class Discus Quest Tech	# 11
ID Need Plan Indiv Diff	# 5	7	8	3	7	5	2	Stand Tests Interp Data	# 13
Motiv & Reinf Students	# 9	8	8	5	8	10	13	Dev/Use Teach Mace Tests	# 15
Organ Phy Class Setting	# 23	9	8	12	9	4	1	Diag/Eval Soc Emot Char	# 17
Communicating, Interactin	# 29	10	8	15	10	5	3	ID Behav Prob & Solution	# 19
Sel Write Goals & Obj	# 1	11	9	1	11	6	6	Dev Self Conc Attit Val	# 21
Ind Instr Maint Rec Perf	# 7	12	10	4	12	8	9	Organ Phy Class Setting	# 23
Dev/Use Teach Made Tests	# 15	13	10	8	13	10	14	Using Audio Visual Equip	# 25
Using Audio Visual Equip	# 25	14	10	13	14	11	15	Know Subject Area	# 27
Know Subject Area	# 27	15	11	14	15	6	10	Communicating, Interactin	# 29

Appendix E

Intake Form (General)

INTAKE FORM

Child's Name_____Age_____Date of Birth_____

Address_____Phone No._____

_____Emergency Phone No._____

Name of parent or guardian_____

Referring Unit_____

Reason for Referral_____

_____

_____

_____

_____

_____

Present Placement of Child_____

_____

Previous Placement, if any_____

_____

Existing Diagnostic Information:

Medical (If Available and Pertinent to Ed. Activities)_____

_____

_____

_____

_____

_____

_____

Psychological_____

_____

_____

_____

_____

_____

Educational_____

_____

_____

_____

_____

Parent permission for release of information:

As the parent or legal guardian of _____,

I hereby give permission for the release of all information concerning my child to the Learning Center.

Signed_____

Parental commitment to involvement:

I hereby agree to become involved in the activities of the Learning Center regarding my child, the degree of involvement to depend on the nature of my child's problem.

Signed_____

General staff Observations and Comments upon completion of intake interview:

1. Visibility of handicap_____

2. Locomotion_____

3. Communication_____

4. Inter-personal_____

5. Other_____

Appendix F

General Diagnostic Battery

INITIAL SCREENING BATTERY

Suggested list of the instruments to be used according to the needs of individual cases:

1. Perceptual-motor

   a. Frostig Test of Visual Perception
   b. Louis Bowers Perceptual Motor Scale
   c. Purdue Perceptual Scale
   d. Informal Check List*

2. Speech and Hearing

   a. Templin-Darley Test of Articulation
   b. Informal Check List

3. Overall Intellectual Functioning

   a. Intelligence Tests (Standord-Binet, W.I.S.C., W.I.S.C., W.I.P.P.S.I.)
   b. DAM.

4. Parental Interviews

   a. Vineland Social Maturity Scale.
   b. Informal Check List.

5. Self-concept

   a. Piers-Harris
   b. Informal Check List

6. Language

   a. Informal Check List

7. Academic Achievement

   a. Informal Check List

---

*Prepared by Dr. Singh

COMPREHENSIVE DIAGNOSTIC BATTERY

1. Perceptual-Motor
   a. T.P.T.
   b. Dynamometer
   c. Visuo-spatial Tests
      1. Drawing to Command
      2. Block Construction
      3. Finger Ginosis ___% verbal : ___% visual
      4. R-L Orientation verbal
      5. R-L Orientation visual
      6. Map Orientation
      7. Ray Osterreith Figure Test
   d. Frontal Lobe Tests
      1. Trail Making Test
      2. Porteus Maze Test
   e. Span Tests
      1. Digit Span
      2. Object Pointing Span
2. General Cognitive Tests
   a. Binet
   b. Wise
   c. WIPPSI
   d. Nancy Bailey
   e. Valett
   f. P.P.V.T.
3. Academic Achievement
   a. Wide Range Achievement Test or equivalent

NOTE: THESE TESTS ARE SUGGESTED. HOWEVER, OTHER BRAIN BEHAVIOR TESTS MAY BE USED ON CASE BY CASE BASIS.

CATEGORIES FOR
BEHAVIORAL MANIPULATIONS IN DIAGNOSIS
AND-REMEDIATION

i. DEGREE OF ABSTRACTION:

ii. SIZE OF STIMULUS FIELD:

iii. TIMING OF TASK:

iv. DEGREE OF ENVIRONMENTAL SUPPORT:

v. ORDER OF PRESENTATION:

vi. CROSS-MODEL EXTINCTION:

vii. DEPRESSION, FATIGUE AND AROUSAL: